

P13000033853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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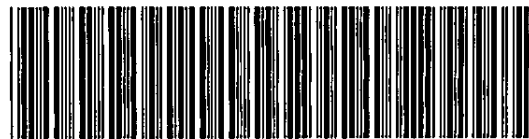
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
13 APR 11 PM 1:30

4/15/13

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Tennis 4 U / Tennis Para Ti Incorporated
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Jeanette Marcus

Name (Printed or typed)

35949 Bozeman Rd

Address

Dade City, FL 33525

City, State & Zip

813-417-0061

Daytime Telephone number

jmarcusddm@gmail.com

E-mail address: (to be used for future annual report notification)

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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Tennis 4 U / Tennis Para Ti Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

35949 Bozeman Road

Dade City, FL 33525

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide tennis lessons in the community.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jeanette Marcus, President

Name and Title: _____

Address 35949 Bozeman Rd.

Address: _____

Dade City, FL 33525

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Jeanette Marcus
Address: 35949 Bozeman Rd
Dade City, FL 33525

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jeanette Marcus
Address: 35949 Bozeman Rd
Dade City, FL 33525

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Jeanette Marcus
Required Signature/Registered Agent

April 8, 2013
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Jeanette Marcus
Required Signature/Incorporator

April 8, 2013
Date